

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS          | ID NO. | DATE     |
|---------------------------|-------------------|--------|----------|
| FEE DETERMINATION         | <i>[initials]</i> |        | 11/23/01 |
| O.I.P.E. CLASSIFIER       | <i>[initials]</i> | 32     | 11/15    |
| FORMALITY REVIEW          | <i>[initials]</i> | 1075   | 11/27/01 |
| RESPONSE FORMALITY REVIEW | A.T.              | 1071   | 01/15/02 |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral).... Cancelled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

09/986 323

| Claim          | Date |
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| Claim          | Date |
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If more than 150 claims or 10 actions  
 staple additional sheet here

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5M/864  
 11/27/01